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CONFIRMATION NO. 2514

<b>SERIAL NUMBER</b> 10/780,844	<b>FILING OR 371(c) DATE</b> 02/18/2004 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2617	<b>ATTORNEY DOCKET NO.</b> 160-012
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**APPLICANTS**  
 Floyd Backes, Sharon, NH;  
 Gary Vacon, East Falmouth, MA;  
 Paul Callahan, Carlisle, MA;  
 William Hawe, Hollis, NH;  
 Laura Bridge, Sharon, NH;

**\*\* CONTINUING DATA \*\*\*\*\***  
 This appln claims benefit of 60/449,602 02/24/2003 and claims benefit of 60/466,448 04/29/2003  
 and claims benefit of 60/472,320 05/21/2003  
 and claims benefit of 60/472,239 05/21/2003 *JOE*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *JOE*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
**\*\* 05/11/2004**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>James</i> Examiner's Signature Initials	<b>STATE OR COUNTRY</b> NH	<b>SHEETS DRAWING</b> 62	<b>TOTAL CLAIMS</b> 3	<b>INDEPENDENT CLAIMS</b> 2
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**ADDRESS**  
34845

**TITLE**  
Transmission channel selection method

<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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